

Practitioner's Docket No. VTY2002-01RM**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:	McCarthy, Jeannette		
Application No.:	10/043,715	Group No.:	1631
Filed:	01/09/2002	Examiner:	M.A. Moran
For:	Diagnosis and Treatment of Vascular Disease		

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL**

1. Transmitted herewith for this application is/are:
  - a. This Amendment Transmittal which includes a request for extension of time (2 pages) (in duplicate); and
  - b. Amendment and Response (8 pages).

**STATUS**

2. Applicant is other than a small entity.

**PETITION FOR EXTENSION OF TIME**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(3)) for a three month extension:

Fee: \$ 950.00

**CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) and 1.10\***

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

- ☐ deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
37 C.F.R. SECTION 1.8(a)

**37 C.F.R. SECTION 1.10\***

- ☐ with sufficient postage as first class mail. ☐ as "Express Mail Post Office to Addressee" Mailing Label No.

**TRANSMISSION**

- ☒ transmitted by facsimile to the Patent and Trademark Office. 703-872-9306

Signature

Kerri Pollard Schray

(type or print name of person certifying)

Date: 15 April 2004

*\*WARNING: Each paper or fee filed by "Express Mail" must have the number of the "Express Mail" mailing label placed thereon prior to mailing. 37 C.F.R. section 1.10(b). "Since the filing of correspondence under section 1.10 without the Express Mail mailing label thereon is an oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.*

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Extension fee due with this request \$950.00

If an additional extension of time is required, please consider this a petition therefor.

**FEE PAYMENT**

5. Charge Account No. 501668 the sum of \$950.00 (which includes the \$950.00 extension fee and the \$0.00 additional fee for claims). A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. If any additional extension and/or fee is required, charge Account No. 501668.  
If any additional fee for claims is required, charge Account No. 501668.
7. Correspondence Address  
Direct all future correspondence to:

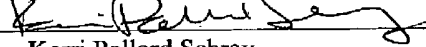
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OR

Intellectual Property Department  
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15 April 2004

MILLENNIUM PHARMACEUTICALS, INC.

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